

UNITED STATES DISTRICT COURT  
DISTRICT OF OREGON

Kimberly D. Michel et al.

Civil Case No. 3:15-cv-01567-HZ

\_\_\_\_\_  
**Plaintiff(s),**  
v.

APPLICATION FOR SPECIAL  
ADMISSION – *PRO HAC VICE*

Navient Solutions, Inc.

\_\_\_\_\_  
**Defendant(s).**

Attorney Kathryn A. Williams requests special admission *pro hac vice* in the above-captioned case.

**Certification of Attorney Seeking *Pro Hac Vice* Admission:** I have read and understand the requirements of LR 83-3, and certify that the following information is correct:

**(1) PERSONAL DATA:**

Name: <u>Williams</u>	Kathryn	A.
(Last Name)	(First Name)	(Middle Initial)
Firm or Business Affiliation: <u>Williamson &amp; Williams LLP</u>		
Mailing Address:	<u>2239 W Viewmont Way W</u>	
City: <u>Seattle</u>	State: <u>WA</u>	Zip: <u>98199</u>
Phone Number: <u>206 294-3085</u>	Fax Number: _____	
Business E-mail Address: <u>Kim@Williamslaw.com</u>		

**(2) BAR ADMISSIONS INFORMATION:**

(a) State bar admission(s), date(s) of admission, and bar ID number(s):  
Washington State Bar Association, 5/16/79, 9077

(b) Other federal court admission(s), date(s) of admission, and bar ID number(s):  
United States District Court, Western District of Washington, 9/17/79  
Ninth Circuit Court of Appeals, 8/20/91

**(3) CERTIFICATION OF DISCIPLINARY ACTIONS:**

(a)  I am not now, nor have I ever been subject to any disciplinary action by any state or federal bar association; or

(b)  I am now or have been subject to disciplinary action from a state or federal bar association. (See attached letter of explanation.)

**(4) CERTIFICATION OF PROFESSIONAL LIABILITY INSURANCE:**

I have professional liability insurance, or financial responsibility equivalent to liability insurance, that will apply and remain in force for the duration of the case, including any appeal proceedings.

**(5) REPRESENTATION STATEMENT:**

I am representing the following party(s) in this case:  
Kimberly D. Michel, Plaintiff and potential class representative

**(6) CM/ECF REGISTRATION:**

Concurrent with approval of this *pro hac vice* application, I acknowledge that I will become a registered user of the Court's Case Management/Electronic Case File system. (See the Court's website at [ord.uscourts.gov](http://ord.uscourts.gov)), and I consent to electronic service pursuant to Fed. R. Civ. P 5(b)(2)(E) and the Local Rules of the District of Oregon.

DATED this 26th day of August, 2015



(Signature of Pro Hac Counsel)

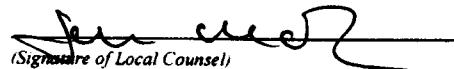
Kathryn A. Williams

(Typed Name)

**CERTIFICATION OF ASSOCIATED LOCAL COUNSEL:**

I certify that I am a member in good standing of the bar of this Court, that I have read and understand the requirements of LR 83-3, and that I will serve as designated local counsel in this particular case.

DATED this 17th day of September, 2015



(Signature of Local Counsel)

Name: Baxter Justin M  
(Last Name) (First Name) (MI) (Suffix)

Oregon State Bar Number: 992178

Firm or Business Affiliation: Baxter & Baxter, LLP

Mailing Address: 8835 SW Canyon Lane, Suite 130

City: Portland State: OR Zip: 97225

Phone Number: (503) 297-9031 Business E-mail Address: justin@baxterlaw.com

**COURT ACTION**

Application approved subject to payment of fees.  
 Application denied.

DATED this \_\_\_\_\_ day of \_\_\_\_\_,

Judge